

SEC. 210. None of the funds appropriated by this Act (including funds appropriated to any trust fund) may be used to carry out the Medicare+Choice program if the Secretary denies participation in such program to an otherwise eligible entity (including a Provider Sponsored Organization) because the entity informs the Secretary that it will not provide, pay for, provide coverage of, or provide referrals for abortions: *Provided*, That the Secretary shall make appropriate prospective adjustments to the capitation payment to such an entity (based on an actuarially sound estimate of the expected costs of providing the service to such entity's enrollees): *Provided further*, That nothing in this section shall be construed to change the Medicare program's coverage for such services and a Medicare+Choice organization described in this section shall be responsible for informing enrollees where to obtain information about all Medicare covered services.

SEC. 211. SUBSTANCE ABUSE.—With respect to fiscal year 2001, the amount of an allotment of a State under section 1921 of the Public Health Services Act shall not be less than the amount the State received under such section for fiscal year 2000 increased by 33.33 percent of the percentage by which the amount allotted to the States for fiscal year 2001 exceeds the amount allotted to the States for fiscal year 2000.

SEC. 212. Notwithstanding any other provision of law, no provider of services under title X of the Public Health Service Act shall be exempt from any State law requiring notification or the reporting of child abuse, child molestation, sexual abuse, rape, or incest.

Mr. PORTER. Mr. Chairman, I ask unanimous consent that the remainder of title II of the bill through page 48, line 25, be considered as read, printed in the RECORD and open to amendment at any point.

The CHAIRMAN. Is there objection to the request of the gentleman from Illinois?

There was no objection.

The CHAIRMAN. The Clerk will read.

The Clerk read as follows:

SEC. 213. None of the funds in this Act or any other Act may be used to obligate funds for the National Institutes of Health in excess of the total amount identified for this purpose for fiscal year 2001 in the President's budget request (H. Doc 106-162): *Provided*, That none of the funds made available for each Institute, Center, Office, or Buildings and Facilities shall be reduced below the amounts shown in the budget request column of the table printed in the report accompanying the bill making appropriations for the Departments of Labor, Health and Human Services, Education, and Related Agencies for fiscal year 2001.

AMENDMENT NO. 13 OFFERED BY MS. PELOSI

Ms. PELOSI. Mr. Chairman, I offer Amendment No. 13.

The CHAIRMAN. Is the gentlewoman from California a designee of the gentleman from Wisconsin (Mr. OBEY)?

Ms. PELOSI. Yes, I am, Mr. Chairman.

Mr. PORTER. Mr. Chairman, I reserve a point of order on the gentlewoman's amendment.

The CHAIRMAN. The Clerk will designate the amendment.

The text of the amendment is as follows:

Amendment No. 13 offered by Ms. PELOSI:
Page 49, strike line 1 through 12 (section 213).

The CHAIRMAN. Pursuant to the order of the House of Thursday, June 8, 2000, the gentlewoman from California (Ms. PELOSI) and a Member opposed each will control 15 minutes.

The Chair recognizes the gentlewoman from California (Ms. PELOSI).

Ms. PELOSI. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, I am introducing this amendment to add \$1.7 billion to the NIH budget. That would bring us to an increase of \$2.7 billion in this bill, which will keep us on track for doubling NIH budget in 5 years.

The distinguished chairman of our committee, the gentleman from Illinois (Mr. PORTER), has long been a champion and advocate for the National Institutes of Health. It is a sad thing then to see in this bill that we cannot stay on track.

Why can we not? We cannot stay on track because of the bad budget numbers that have reduced a bad result in this bill, as I said, when we talked about this during general debate, when they asked the question why do so many excellent mathematicians come out of MIT, because so many good mathematicians go into MIT.

Why, conversely, do so many bad results come out of this appropriations process? Because a bad budget bill went into this appropriations process, because that budget agreement, that budget bill insists on a huge tax cut for the wealthiest Americans.

If the majority were willing to cut that tax break for the wealthiest 1 percent in our country by 20 percent, we would have more than enough money to cover all of the amendments that we are talking about in the course of this debate on this legislation; whether it deals with afternoon childcare or worker training or increasing the funding at the National Institutes of Health; whether we are talking about having more funds available to stop substance abuse in our country.

The list goes on and on, but who benefits instead? The wealthiest 1 percent in our country. Indeed, that same wealthiest 1 percent would benefit from increased investments at the National Institutes of Health. Members all know that the National Institutes of Health almost has a biblical power to cure every person in America, rich or poor, who is one episode, one diagnosis, one accident away from needing access to excellent health care. The research at the National Institutes of Health can find cures.

We have far more scientific opportunity and applications for excellent grants than we are able to meet with appropriate funding. Mr. Chairman, again, the gentleman from Illinois (Mr. PORTER) and the gentleman from Wisconsin (Mr. OBEY) have both been long-time champions of increased funding at NIH, but that cannot happen in this bill, sad to say.

In fact, in the bill before us it says that we have a \$2.7 billion increase, recognizing the need that my amend-

ment spells out; yet a provision in the back of the bill limits the amount appropriated each of the accounts to the level requested by the President.

I will have more to say on this, Mr. Chairman, after we hear from some of our other colleagues.

Mr. Chairman, I reserve the balance of my time.

The CHAIRMAN. The Committee will rise informally.

The SPEAKER pro tempore (Mr. SESSIONS) assumed the Chair.

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MESSAGE FROM THE PRESIDENT

A message in writing from the President of the United States was communicated to the House by Ms. McDevett, one of his secretaries.

The SPEAKER pro tempore. The Committee will resume its sitting.

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DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATIONS ACT, 2001

The Committee resumed its sitting.

The CHAIRMAN. Does the gentleman from Illinois (Mr. PORTER) rise in opposition?

Mr. PORTER. Mr. Chairman, I rise in opposition.

The CHAIRMAN. The gentleman from Illinois is recognized for 15 minutes.

Mr. PORTER. Mr. Chairman, I yield myself such time as I may consume.

Mr. Chairman, as I said to the gentlewoman from California (Ms. PELOSI) in full committee markup of this bill, this amendment, of course, tests my resolve more than any other of your theme amendments.

I consider the funding for NIH to be of the highest priority I would very much have liked to put into this bill the full 15 percent increase that I believe is necessary and proper. Such funding is among the best spent money in government to continue on our path of doubling NIH over a 5-year period. Unfortunately, the allocation was not sufficient to do so.

We have in the bill a limitation to limit the obligation to the President's budget, which is a \$1 billion increase less the cap and comes out to probably 4 percent to 5 percent, rather than the 15 percent that we favor.

However, the gentlewoman has just used this amendment to make a number of political points, and I would simply say to the gentlewoman she ought to look at the history of funding for NIH. It indicates that the President of the United States has put this at a very, very low priority in all of his budgets for the last 5 years, while the majority party has put it at a very, very high priority.

Congress has provided a total of \$7.8 billion in cumulative increases for NIH as opposed to the \$4.3 billion requested by the President over the last 5 years. We have put NIH on a funding path to